



Bison Oil & Gas II, LLC

518 17th Street, Suite 1800
Denver, CO 80202
Phone: 720-644-6997
Fax: 303-974-1767

March 27, 2020

Mr. Gregory Sopkin
EPA Region 8 Administrator
U.S. Environmental Protection Agency
1595 Wynkoop St.
Denver, CO 80202-1129

RE: NSPS OOOOa Certifying Official Delegation Notification

Dear Mr. Sopkin,

This letter is a notification of the delegation of NSPS Certifying Official responsibilities, as required under §60.5430a, for affected facilities operated by Bison Oil & Gas II, llc. As of the date of this letter, the Designated Representative is as follows:

Certifying Official

Todd Wolff
Name

VP Operations
Title

Designated Representative

Nica Hoshijo
Name

Sr. Staff Environmental Specialist
Title

Thank you,

Todd Wolff
VP Operations
Bison Oil & Gas II, LLC



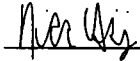
NSPS 40 CFR 60 Subpart OOOOa – Certification of Truth, Accuracy and Completeness

The Certifying Official must provide a certification of truth, accuracy, and completeness with regards to annual report submittals under NSPS OOOOa, per §60.5420a(b)(1)(iv). For the attached annual report, I certify that:

“Based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.”

Name: Nica Hoshijo

Title: Sr. Staff Environmental Specialist

Signature: 

Date: 6/4/2020

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5420a(b) Annual Report
For each pneumatic pump affected facility, an owner or operator must include the information specified in paragraphs (b)(8)(i) through (iii) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

					Pneumatic Pumps Previously Reported that have a Change in Reported Condition During the Reporting Period				
Facility Record No. * (Select from dropdown list - may need to scroll up.)	Identification of Each Pump * (60.5420a(b)(1))	Was the pneumatic pump constructed, modified, or reconstructed during the reporting period? * (60.5420a(b)(8)(i))	Which condition does the pneumatic pump meet? * (60.5420a(b)(8)(ii))	If your route emissions to a control device and the control device is designed to achieve <95% emissions reduction, specify the percent emissions reduction. * (60.5420a(b)(8)(iii)(C))	Identification of Each Pump * (60.5420a(b)(8)(ii))	Date Previously Reported* (60.5420a(b)(8)(ii))	Which condition does the pneumatic pump meet? * (60.5420a(b)(8)(ii))	If you now route emissions to a control device and the control device is designed to achieve <95% emissions reduction, specify the percent emissions reduction. * (60.5420a(b)(8)(ii) and 60.5420a(b)(8)(iii)(C))	Records of deviations where the pneumatic pump was not operated in compliance with requirements* (60.5420a(b)(8)(iii) and 60.5420a(c)(16)(ii))
	e.g.: Pump 12-e-2 e.g.: modified		e.g.: Emissions are routed to a control device or process e.g.: 90%		e.g.: Pump 12-e-2	e.g.: 10/15/17	e.g.: Control device/process removed and technically infeasible to route elsewhere e.g.: 90%		e.g.: deviation of the CVS inspections

N/A

The asterisk (*) next to each field indicates that the corresponding field is required.

40 CFR Part 82 - Standards of Performance for CFC and HCFC and Phase-Out Schedule for their Production, Consumption, Modification or Reconstruction Commenced After September 18, 2005 - 40 (Mandatory) Annual Report
For each storage vessel affected facility, an owner or operator must include the information specified in paragraphs (b)(2)(i) through (b)(2)(vii) of this section in its annual report.

This section (7) refers to each field in the corresponding table in the following table:

Storage Vessel Containing, Storing, Transporting, or Processing a Refrigerant Under Pressure										Storage Vessel Containing, Storing, Transporting, or Processing a Refrigerant Under Pressure									
Facility Name (b)(1) * Storage Vessel ID * (b)(1)(ii)(B)(i) and (b)(1)(ii)(B)(ii)	When the storage vessel was constructed, modified or reconstructed during the reporting period * (b)(1)(ii)(B)(iii)	Latitude of Storage Vessel (b)(1)(ii)(B)(iv) * Degrees and Minutes North or South of the Equator (b)(1)(ii)(B)(v) * Degrees and Minutes East or West of the Prime Meridian (b)(1)(ii)(B)(vi) *	Longitude of Storage Vessel (b)(1)(ii)(B)(vii) * Degrees and Minutes East or West of the Prime Meridian (b)(1)(ii)(B)(viii) *	If new affected facility or if reconstructed during the reporting period, provide information on the design, construction, and operation of the storage vessel according to 40 CFR 82.104(a) * (b)(1)(ii)(B)(ix) and (b)(1)(ii)(B)(x)	Records of deviations when the storage vessel was not constructed or reconstructed in accordance with requirements * (b)(1)(ii)(B)(xi) and (b)(1)(ii)(B)(xii)	Have you met the requirements specified in 40 CFR 82.104(a)(1) through (b)(1)(ii)(B)(xii) * (b)(1)(ii)(B)(xiii) and (b)(1)(ii)(B)(xiv)	Estimated from service during the reporting period * (b)(1)(ii)(B)(xv) and (b)(1)(ii)(B)(xvi)	If removed from service, the date removed or the date of removal * (b)(1)(ii)(B)(xvii) and (b)(1)(ii)(B)(xviii)	Returned to service during the reporting period * (b)(1)(ii)(B)(xix) and (b)(1)(ii)(B)(xx)	If removed from service, the date removed or the date of removal * (b)(1)(ii)(B)(xxi) and (b)(1)(ii)(B)(xxii)	Make of Purchase * (b)(1)(ii)(B)(xxiii) and (b)(1)(ii)(B)(xxiv)	Model of Purchase * (b)(1)(ii)(B)(xxv) and (b)(1)(ii)(B)(xxvi)	Serial Number of Purchase * (b)(1)(ii)(B)(xxvii) and (b)(1)(ii)(B)(xxviii)	Date of Purchase * (b)(1)(ii)(B)(xxix) and (b)(1)(ii)(B)(xxx)	Capacity of Purchase * (b)(1)(ii)(B)(xxxi) and (b)(1)(ii)(B)(xxxii)	Latitude of Control Device (b)(1)(ii)(B)(xxxiii) * Degrees and Minutes North or South of the Equator (b)(1)(ii)(B)(xxxiv) * Degrees and Minutes East or West of the Prime Meridian (b)(1)(ii)(B)(xxxv) *	Longitude of Control Device (b)(1)(ii)(B)(xxxvi) * Degrees and Minutes East or West of the Prime Meridian (b)(1)(ii)(B)(xxxvii) *	Model Nameplate * (b)(1)(ii)(B)(xxxviii) and (b)(1)(ii)(B)(xxxix)	When the storage vessel was last inspected * (b)(1)(ii)(B)(xl) and (b)(1)(ii)(B)(xli)
e.g. 123456789	e.g. 12/15/2005	e.g. 123456789	e.g. 123456789	e.g. VDC construction is 12/15/2005, see the date, reconstructed for more information.	e.g. On October 11, 2005, deviation there was not found on the production unit involving the storage vessel.	e.g. Yes	e.g. Yes	e.g. 12/15/2005	e.g. Yes	e.g. 12/15/2005	e.g. Refrigeration Co.	e.g. R123456789	e.g. 123456789	e.g. 12/15/2005	e.g. 123456789	e.g. 123456789	e.g. 123456789	e.g. 123456789	e.g. 12/15/2005

NA

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5420a(b) Annual Report

For each pneumatic controller affected facility, an owner or operator must include the information specified in paragraphs (b)(5)(i) through (iii) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

Facility Record No. *	Pneumatic Controller Identification * (\$60.5420a(b)(1)(ii), \$60.5420a(b)(5)(i), and \$60.5390a(b)(2) or \$60.5390a(c)(2))	Was the pneumatic controller constructed, modified or reconstructed during the reporting period? *	Month of Installation, Reconstruction, or Modification* (\$60.5420a(b)(5)(i) and \$60.5390a(b)(2) or \$60.5390a(c)(2))	Year of Installation, Reconstruction, or Modification* (\$60.5420a(b)(5)(i) and \$60.5390a(b)(2) or \$60.5390a(c)(2))	Pneumatic Controllers with a Natural Gas Bleed Rate Greater than 6 scfh		Records of deviations where the pneumatic controller was not operated in compliance with requirements* (\$60.5420a(b)(5)(iii) and \$60.5420a(c)(4)(vi))
					Documentation that Use of a Pneumatic Controller with a Natural Gas Bleed Rate Greater than 6 Standard Cubic Feet per Hour is required * (\$60.5420a(b)(5)(ii))	Reasons Why * (\$60.5420a(b)(5)(iii))	
N/A	e.g.: Controller 12A	e.g.: modified	e.g.: February	e.g.: 2017	e.g.: Controller has a bleed rate of 8 scfh.	e.g.: safety bypass controller requires use of a high-bleed controller	e.g.: Controller was not tagged with month and year of installation.

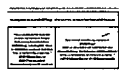
40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5420a(b) Annual Report
For each reciprocating compressor affected facility, an owner or operator must include the information specified in paragraphs (b)(4)(i) and (ii) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

Facility Record No. * (Select from dropdown list - may need to scroll up)	Compressor ID * (\$60.5420a(b)(1)(iii))	Are emissions from the rod packing unit being routed to a process through a closed vent system under negative pressure? * (\$60.5420a(b)(4)(i))	If emissions are not routed to a process through a closed vent system under negative pressure, what are the cumulative number of hours or months of operation since initial startup or the previous rod packing replacement (whichever is later)? * (\$60.5420a(b)(4)(i))	Units of Time Measurement * (\$60.5420a(b)(4)(i))	Deviations where the reciprocating compressor was not operated in compliance with requirements* (\$60.5420(b)(4)(ii) and \$60.5420a(c)(3)(iii))
	e.g.: Comp-12b	e.g.: no	e.g.: 2	e.g.: months	e.g.: Rod packing replacement exceeded 36 months. Replacement occurred after 37 months.

N/A

[illegible]



GENERAL INFORMATION			IDENTIFICATION AND CLASSIFICATION										ANALYSIS AND EVALUATION										CONCLUSIONS AND RECOMMENDATIONS										SUMMARY																																				
			Project Name		Project Number		Project Title		Project Description		Project Objectives		Project Scope		Project Location		Project Start Date		Project End Date		Project Status		Project Manager		Project Sponsor		Project Lead		Project Analyst		Project Reviewer				Project Approver		Project Sign-off		Project Date		Project Version		Project Revision		Project Change		Project Impact		Project Risk		Project Benefit		Project Cost		Project Time		Project Quality		Project Health		Project Trend		Project Forecast		Project Action		Project Result		Project Outcome
Project A	1001	Project A Title	Project A Description	Project A Objectives	Project A Scope	Project A Location	Project A Start Date	Project A End Date	Project A Status	Project A Manager	Project A Sponsor	Project A Lead	Project A Analyst	Project A Reviewer	Project A Approver	Project A Sign-off	Project A Date	Project A Version	Project A Revision	Project A Change	Project A Impact	Project A Risk	Project A Benefit	Project A Cost	Project A Time	Project A Quality	Project A Health	Project A Trend	Project A Forecast	Project A Action	Project A Result	Project A Outcome	Project A Conclusion	Project A Recommendation																																			
Project B	1002	Project B Title	Project B Description	Project B Objectives	Project B Scope	Project B Location	Project B Start Date	Project B End Date	Project B Status	Project B Manager	Project B Sponsor	Project B Lead	Project B Analyst	Project B Reviewer	Project B Approver	Project B Sign-off	Project B Date	Project B Version	Project B Revision	Project B Change	Project B Impact	Project B Risk	Project B Benefit	Project B Cost	Project B Time	Project B Quality	Project B Health	Project B Trend	Project B Forecast	Project B Action	Project B Result	Project B Outcome	Project B Conclusion	Project B Recommendation																																			
Project C	1003	Project C Title	Project C Description	Project C Objectives	Project C Scope	Project C Location	Project C Start Date	Project C End Date	Project C Status	Project C Manager	Project C Sponsor	Project C Lead	Project C Analyst	Project C Reviewer	Project C Approver	Project C Sign-off	Project C Date	Project C Version	Project C Revision	Project C Change	Project C Impact	Project C Risk	Project C Benefit	Project C Cost	Project C Time	Project C Quality	Project C Health	Project C Trend	Project C Forecast	Project C Action	Project C Result	Project C Outcome	Project C Conclusion	Project C Recommendation																																			
Project D	1004	Project D Title	Project D Description	Project D Objectives	Project D Scope	Project D Location	Project D Start Date	Project D End Date	Project D Status	Project D Manager	Project D Sponsor	Project D Lead	Project D Analyst	Project D Reviewer	Project D Approver	Project D Sign-off	Project D Date	Project D Version	Project D Revision	Project D Change	Project D Impact	Project D Risk	Project D Benefit	Project D Cost	Project D Time	Project D Quality	Project D Health	Project D Trend	Project D Forecast	Project D Action	Project D Result	Project D Outcome	Project D Conclusion	Project D Recommendation																																			
Project E	1005	Project E Title	Project E Description	Project E Objectives	Project E Scope	Project E Location	Project E Start Date	Project E End Date	Project E Status	Project E Manager	Project E Sponsor	Project E Lead	Project E Analyst	Project E Reviewer	Project E Approver	Project E Sign-off	Project E Date	Project E Version	Project E Revision	Project E Change	Project E Impact	Project E Risk	Project E Benefit	Project E Cost	Project E Time	Project E Quality	Project E Health	Project E Trend	Project E Forecast	Project E Action	Project E Result	Project E Outcome	Project E Conclusion	Project E Recommendation																																			
Project F	1006	Project F Title	Project F Description	Project F Objectives	Project F Scope	Project F Location	Project F Start Date	Project F End Date	Project F Status	Project F Manager	Project F Sponsor	Project F Lead	Project F Analyst	Project F Reviewer	Project F Approver	Project F Sign-off	Project F Date	Project F Version	Project F Revision	Project F Change	Project F Impact	Project F Risk	Project F Benefit	Project F Cost	Project F Time	Project F Quality	Project F Health	Project F Trend	Project F Forecast	Project F Action	Project F Result	Project F Outcome	Project F Conclusion	Project F Recommendation																																			
Project G	1007	Project G Title	Project G Description	Project G Objectives	Project G Scope	Project G Location	Project G Start Date	Project G End Date	Project G Status	Project G Manager	Project G Sponsor	Project G Lead	Project G Analyst	Project G Reviewer	Project G Approver	Project G Sign-off	Project G Date	Project G Version	Project G Revision	Project G Change	Project G Impact	Project G Risk	Project G Benefit	Project G Cost	Project G Time	Project G Quality	Project G Health	Project G Trend	Project G Forecast	Project G Action	Project G Result	Project G Outcome	Project G Conclusion	Project G Recommendation																																			
Project H	1008	Project H Title	Project H Description	Project H Objectives	Project H Scope	Project H Location	Project H Start Date	Project H End Date	Project H Status	Project H Manager	Project H Sponsor	Project H Lead	Project H Analyst	Project H Reviewer	Project H Approver	Project H Sign-off	Project H Date	Project H Version	Project H Revision	Project H Change	Project H Impact	Project H Risk	Project H Benefit	Project H Cost	Project H Time	Project H Quality	Project H Health	Project H Trend	Project H Forecast	Project H Action	Project H Result	Project H Outcome	Project H Conclusion	Project H Recommendation																																			
Project I	1009	Project I Title	Project I Description	Project I Objectives	Project I Scope	Project I Location	Project I Start Date	Project I End Date	Project I Status	Project I Manager	Project I Sponsor	Project I Lead	Project I Analyst	Project I Reviewer	Project I Approver	Project I Sign-off	Project I Date	Project I Version	Project I Revision	Project I Change	Project I Impact	Project I Risk	Project I Benefit	Project I Cost	Project I Time	Project I Quality	Project I Health	Project I Trend	Project I Forecast	Project I Action	Project I Result	Project I Outcome	Project I Conclusion	Project I Recommendation																																			
Project J	1010	Project J Title	Project J Description	Project J Objectives	Project J Scope	Project J Location	Project J Start Date	Project J End Date	Project J Status	Project J Manager	Project J Sponsor	Project J Lead	Project J Analyst	Project J Reviewer	Project J Approver	Project J Sign-off	Project J Date	Project J Version	Project J Revision	Project J Change	Project J Impact	Project J Risk	Project J Benefit	Project J Cost	Project J Time	Project J Quality	Project J Health	Project J Trend	Project J Forecast	Project J Action	Project J Result	Project J Outcome	Project J Conclusion	Project J Recommendation																																			

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 60.5420a(b) Annual Report
For each affected facility, an owner or operator must include the information specified in paragraphs (b)(1)(i) through (iv) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

SITE INFORMATION										ALTERNATIVE ADDRESS INFORMATION (IF NO PHYSICAL ADDRESS AVAILABLE FOR SITE *)			REPORTING INFORMATION		PE Certification	ADDITIONAL INFORMATION		
Facility Record No. * [Field value will automatically generate if a value is not entered.]	Company Name * (\$60.5420a(b)(1)(i))	Facility Site Name * (\$60.5420a(b)(1)(ii))	US Well ID or US Well ID Associated with the Affected Facility, if applicable. * (\$60.5420a(b)(1)(iii))	Address of Affected Facility * (\$60.5420a(b)(1)(iv))	Address 2	City *	County *	State Abbreviation *	Zip Code *	Responsible Agency Facility ID (State Facility Identifier)	Description of Site Location (\$60.5420a(b)(1)(i))	Latitude of the Site (decimal degrees to 5 decimals using the North American Datum of 1983) (\$60.5420a(b)(1)(ii))	Longitude of the Site (decimal degrees to 5 decimals using the North American Datum of 1983) (\$60.5420a(b)(1)(iii))	Beginning Date of Reporting Period * (\$60.5420a(b)(1)(iv))	Ending Date of Reporting Period * (\$60.5420a(b)(1)(v))	Please provide the file name that contains the certification signed by a qualified professional engineer for each closed vent system routing to a control device or process. * (\$60.5420a(b)(1)(vi)) Please provide only one file per record.	Please enter any additional information.	Enter associated file name reference.
e.g.: ABC Company	e.g.: XYZ Compressor Station	e.g.: 12-345-67890-12	e.g.: 123 Main Street	e.g.: Suite 100	e.g.: Brooklyn	e.g.: Kings County	e.g.: NY	e.g.: 11221	e.g.: 7 miles NE of the intersection of Hwy 123 and Hwy 456	e.g.: 34.12345	e.g.: -101.12345	e.g.: 01/01/2016	e.g.: 06/30/2016	e.g.: Certification.pdf or XYZCompressorStation.pdf		e.g.: addinfo.zip or XYZCompressorStation.pdf		
Castor	Bison Oil and Gas II, LLC	Castor 8-59 19 Well Pr	05-123-45842-00	See alternative	See alternative	See alternative	See alternative	See alternative	See alternative	123/9FC2	1/4 mile northeast of the interse	40.64471	-104.01199	2/14/2019	2/13/2020	n/a		



Bison Oil & Gas II, LLC

518 17th Street, Suite 1800
Denver, CO 80202
Phone: 720-644-6997
Fax: 303-974-1767

June 9, 2020

Mr. Gregory Sopkin
U.S. EPA Region 8 Director
Air and Toxics Technical Enforcement Program
Office of Enforcement, Compliance and Environmental Justice
Mail Code 8ENF-AT
1595 Wynkoop Street
Denver, CO 80202-1129

RE: NSPS 40 CFR 60 Subpart OOOOa Annual Report

Dear Mr. Sopkin,

Please find attached the NSPS OOOOa annual report for the Castor Fed 8-59-19 production facility per §60.5420a(b). The facility is owned and operated by Bison Oil & Gas II, LLC. In addition to the annual report, the Certification and a copy of the Delegation of Authority Letter for the designated representative are also attached.

Please contact me at nhoshijo@bisonog.com or (720) 644-6997 ext. 6-8 if there are any questions.

Sincerely,

Nica Hoshijo, P.E.

Bison Oil & Gas II, LLC
Sr. Staff Environmental Specialist
518 17th St., Suite 1800
Denver, CO 80202
Office: (720) 644-6997 ext. 6-8
Cell: (303) 358-9545
nhoshijo@bisonog.com

Attachments: 2019 NSPS OOOOa Annual Report for Castor Fed 8-59-19 Production Facility
Certification Statement
Copy of Delegation of Authority Letter

Western Midstream
WesternMidstream.com

RECEIVED

March 20, 2020

APR 08 2020

Enforcement and Compliance
Assurance Division

Via Certified Mail No: 91 7199 9991 7038 9172 0469

US EPA, Region 8
1595 Wynkoop Street
Denver, CO 80202-1129

**RE: § 60.7(a)(3) Notification of Startup for NSPS 0000a Affected Facilities
Latham Gas Plant Affected Facilities (process units)**

Dear EPA:

Kerr-McGee Gathering LLC (KMG) is submitting this notification to correct an error in a previously-submitted notification of startup, and to satisfy the notification of startup requirements of 60.7(a)(3).

The initial startup of the process unit identified as "Train 2 Cryo" was erroneously reported (on the 12/23/2019 submittal) as having a startup date of December 14, 2019. The startup date for "Train 2 Cryo" was February 14, 2020.

Attached is confirmation of the notification of startup submittal to the Colorado Department of Public Health and Environment for the heater that is associated with "Train 2 Cryo".

Please contact me at (720) 929-6135 or joel_kenyon@oxy.com if you have any questions or require additional information.

Sincerely,

Joel Kenyon

Joel Kenyon
Air Quality Representative



This Notice of Startup was received by the Division on: 2/27/2020 9:47:38 AM



COLORADO
Department of Public
Health & Environment

Form APCD-103

Version 2016.09.13

Air Pollution Control Division Notice of Start-up

NOTICE REQUIRED WITHIN 15 DAYS FOLLOWING START-UP OF ALL NEW SOURCES OR PERMIT ISSUANCE FOR EXISTING SOURCES REQUIRING A NOTICE OF START-UP.

Per Colorado Regulation 3, Part B, Section III.G.1, operators of air pollution emissions sources who obtain a construction permit which requires submittal of a "Notice of Start-up" within 15 calendar days of commencement of operation or permit issuance shall file this form with the Air Pollution Control Division. It is a violation of the permit if the start-up date of a new emission source is not reported within 15 calendar days of commencement of operation. If multiple pieces of equipment (i.e. "emission points") covered by a single permit (i.e. "facility-wide permit") will have different start-up dates, a separate Notice of Start-up must be filed for each emission point.

Notification of start-up may be accomplished by filling out the form below and submitting it electronically.

*Upon electronic submission, an email will be generated and sent to the email address listed on the bottom line of this form under the Signature of Certifying Official and Contact Information section. The completed NOS will be attached as a PDF document.

****You must send a printed copy of this form to the Division if you do not have an AIRS ID or a permit number.**

You may complete, print and mail this Notice of Start-up to the Division at the address below.

Colorado Department of Public Health and Environment

APCD-SS-B1

4300 Cherry Creek Dr. South

Denver, CO 80246-1530

Please contact the Division immediately at (303) 692-3150 if you have any questions or problems concerning this requirement.

I. Company information					
Company name: Kerr-McGee Gathering LLC					
Company phone number: 720-929-6135		Extension:			
Company mailing address: PO Box 173779		Denver		Colorado 80217	
Street address		City		State Zip code	
II. Site information					
Facility name: Latham Gas Plant					
Facility address or location:		Sec 2 T3N R66W		123	
Street Address or Location		City		State Zip Code County	
III. Permit information					
Fill in either "permit number" or "general permit" If you don't have either, do not submit this form electronically. You must mail in a printed copy.					
Permit number 17WE0398			General permit		
IV. Equipment information					
If submitting this form for any type of engine (i.e. compressor engine, generator, etc.), select Engine in equipment type, and describe the type of engine in the additional comments.					
AIRS ID example: 126-1234-001	Equipment type	Equipment details:			
123-9F22-003	Other	Make Tulsa Heaters Midstream Model SHO 2000	Serial Number 17-279	Mfr Date	Reloc Date
	Additional comments:	Train 2 mole sieve heater, aka H-32711			
	Select	Make	Model	Serial Number	Mfr Date Reloc Date
	Additional comments:				
	Select	Make	Model	Serial Number	Mfr Date Reloc Date
	Additional comments:	process flare			
V. Emission source(s) start-up date					
Operation of the emission source(s) to which the above permit number is assigned began on:					02/14/2020
VI. Signature of certifying official and contact information					
Print name: Joel Kenyon		Signature*: Joel Kenyon		Date: 02/27/2020	
Title: HSSE Manager		Email: joel_kenyon@oxy.com		Phone: 720-929-6135 Ext:	

*By typing your name in the signature line, you are certifying that you are an authorized representative of the company listed above, and the information provided in this NOS is true and accurate to the best of your knowledge.